

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Applicants: Debra M. Eckert, David C. Chan, Vladimir N. Malashkevich, Peter A. Carr and Peter S. Kim

Application No.: 09/746,742

Group: 1614

Filed: December 21, 2000

Examiner: Not Assigned

For: Inhibitors of HIV Membrane Fusion

RECEIVED  
JAN 29 2002  
TECH CENTER 1600/2600

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Assistant Commissioner for Patents, Washington, D.C. 20231	
on 10-25-01	<i>Jenine Crump</i>
Date	Signature
<i>Jenine Crump</i>	
Typed or printed name of person signing certificate	

Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:

Transmitted herewith is Preliminary Amendment for filing in the above-identified application.

- [ ] Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.
- [ ] A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The fee has been calculated as shown below:

(COL. 1)		(COL. 2)		(COL. 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	97	MINUS	* 97	0
INDEP	24	MINUS	** 24	0
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

\* not fewer than 20  
\*\* not fewer than 3

SMALL ENTITY		
	RATE	ADDIT. FEE
X	\$ 9	\$
X	\$42	\$
+	\$140	\$

TOTAL = \$ 0

OTHER THAN SMALL ENTITY		
	RATE	ADDIT. FEE
X	\$18	\$
X	\$84	\$
+	\$280	\$

TOTAL = \$ 0

Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for [ ] month Extension of Time	\$	_____
<input type="checkbox"/>	Amendment Fee	\$	_____
<input type="checkbox"/>	Other Fees:		
	_____	\$	_____
	_____	\$	_____
		TOTAL:	\$ <u>0</u>

A check is enclosed in payment of the following fees:

<input type="checkbox"/>	Petition for [ ] month Extension of Time	\$	_____
<input type="checkbox"/>	Amendment Fee	\$	_____
<input type="checkbox"/>	Other Fees:		
	_____	\$	_____
	_____	\$	_____
		TOTAL:	\$ <u>0</u>

☒ A general authorization is hereby granted to charge Deposit Account No. 08-0380 for any fees required under 37 C.F.R. 1.16 and 1.17 in order to maintain pendency of this application. A copy of this authorization is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By

  
Anne J. Collins

Registration No.: 40,564

Telephone (978) 341-0036

Facsimile (978) 341-0136

Concord, Massachusetts 01742-9133

Dated:

*October 25, 2001*

**FILE COPY**

## UNITED STATES PATENT AND TRADEMARK OFFICE

 COMMISSIONER FOR PATENTS  
 UNITED STATES PATENT AND TRADEMARK OFFICE  
 WASHINGTON, D.C. 20231  
 www.uspto.gov


Bib Data Sheet

CONFIRMATION NO. 8580

<b>SERIAL NUMBER</b> 09/746,742	<b>FILING DATE</b> 12/21/2000 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1627	<b>ATTORNEY DOCKET NO.</b> 0399.1192-008
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**APPLICANTS**  
 Debra M. Eckert, Cambridge, MA;  
 David C. Chan, Arcadia, CA;  
 Vladimir Malashkevich, Belmont, MA;  
 Peter A. Carr, Somerville, MA;  
 Peter S. Kim, Lexington, MA;

**\*\* CONTINUING DATA \*\*\*\*\***  
 THIS APPLICATION IS A CON OF PCT/US99/17351 07/30/1999  
 WHICH CLAIMS BENEFIT OF 60/094,676 07/30/1998  
 AND CLAIMS BENEFIT OF 60/100,265 09/14/1998  
 AND CLAIMS BENEFIT OF 60/101,058 09/18/1998  
 AND CLAIMS BENEFIT OF 60/132,295 05/03/1999

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 03/06/2001**

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 45	<b>TOTAL CLAIMS</b> 97	<b>INDEPENDENT CLAIMS</b> 24
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Verified and Acknowledged \_\_\_\_\_  
 Examiner's Signature \_\_\_\_\_ Initials \_\_\_\_\_

**ADDRESS**  
21005

**TITLE**  
Inhibitors of HIV membrane fusion

<b>FILING FEE RECEIVED</b> 3906	<b>FEES:</b> Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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